Ravisiad 06/08

ICMA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A DES MOINES, IA 50319 Fax: (515)281-4073 www.lowa.gov/ethics



low/a Code section 3.7 requires alligifier not bequests given to any department of the state of lowal or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Foard and the Covernment Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

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FORM-GB		
Gift or Bequest information received by a department or accepted by the Governor or behalf of the state		
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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUE
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Area Code & Telephone No. DNTAC" PERSON FOR RECIPLENT DISPARTMENT OR OFFICE	
Kirn Check :	
Mailing Ademas (if different from above) kun checks@icwn.gov	City, State, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from a 2-3vt)
Capitol View Credit Union Warns 1000 E Grand Avenue Des Moines IA 50319 Mailing Address City, State, Zip Code 515-725-2167 Area Code & Telephone Number brent@CWX.com Email Address (optional) Provide a description of the geft or bequest and purpose thereof: 2017 M.L.K. Essay Contest Winners	December 5, 2016 \$200.00 Date of Gift or Bequest Amount/Value* *value is defined as "air market value" of item as determined by receiving department or office. If no value mark "0.00".
Criteria to use this form: Receipt of any gift or bequest that is received by any department of the sta	ita or received by the Governor on behalf of the state.
assessment of the fair market value (If applicable) is correct and true to the bo	is accurate. I further affirm that the information concerning the donor and set of my knowledge,
Him Cheelen.	December 5, 2016
Signature	Date